

# Congressman John K. Delaney

## U.S. Service Academy Nomination Application Form

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### PERSONAL INFORMATION

LAST NAME:	<input type="text"/>		
FIRST NAME:	<input type="text"/>	MIDDLE	<input type="text"/>
STREET ADDRESS:	<input type="text"/>		
CITY:	<input type="text"/>		
STATE:	<input type="text"/>	ZIP CODE:	<input type="text"/>
EMAIL ADDRESS:	<input type="text"/>		
PHONE NUMBER:	<input type="text"/>		
DATE OF BIRTH:	<input type="text"/>		
SSN:	<input type="text"/>		

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### EDUCATION

NAME OF SCHOOL:	<input type="text"/>		
STREET ADDRESS:	<input type="text"/>		
CITY:	<input type="text"/>		
STATE:	<input type="text"/>	ZIP CODE:	<input type="text"/>
GPA:	<input type="text"/>	YEAR OF GRADUATION:	<input type="text"/>

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## TESTING SCORES

SAT SCORE  
(COMBINED):

DATE OF TEST:

SAT (MATH):

SAT (CRITICAL  
READING):

SAT (WRITING-  
OPTIONAL):

ACT SCORE:

DATE OF TEST:

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## EXTRACURRICULAR ACTIVITIES (If you need more space, please attach a new page.)

ACTIVITY:

GRADE  
PARTICIPATED:

☐ 9th

☐ 10th

☐ 11th

☐ 12th

BRIEF  
DESCRIPTION OF  
YOUR ROLE:

ACTIVITY:

GRADE  
PARTICIPATED:

☐ 9th

☐ 10th

☐ 11th

☐ 12th

BRIEF  
DESCRIPTION OF  
YOUR ROLE:

ACTIVITY:

GRADE  
PARTICIPATED:

☐ 9th

☐ 10th

☐ 11th

☐ 12th

BRIEF  
DESCRIPTION OF  
YOUR ROLE:

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**EMPLOYMENT (If you need additional space, please attach a new page.)**NAME OF  
BUSINESS:

ADDRESS:

HOURS PER WEEK:

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**ACADEMY SELECTION**

Please number the academies in order of preference. **Remember that you must open a candidate file with each academy that you select.** By selecting a second and/or third choice, you are indicating that you would also accept a nomination to that academy.

U.S. Air Force  
Academy☐U.S. Merchant  
Marine Academy☐U.S. Military  
Academy☐

U.S. Naval Academy

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**OTHER QUESTIONS**

Have you ever been  
suspended or  
expelled from your  
high school and/or  
job? If so, please  
attach a letter  
explaining the  
circumstances.

☐

YES

☐

NO

Have you ever  
been arrested,  
convicted, and/  
or fined for any  
violation of the  
law? If so, please  
attach a letter  
explaining the  
circumstances.

☐

YES

☐

NO

**Failure to provide truthful information will result in the denial of your application.**

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**PLEASE READ BEFORE SIGNING:**

- 1. I have read the provided information sheet explaining the nomination procedure and am familiar with the requirements and expectations.**
- 2. I certify that I am a legal U.S. Citizen and resident of the Sixth Congressional District of Maryland.**
- 3. I understand that if I am successfully appointed and nominated to a U.S. Service Academy and I do not fulfill all my duties and obligations as a cadet/midshipman and active duty service member, I will be responsible for the full cost of my education.**
- 4. I understand that if my application packet is not postmarked by October 17, 2015, I will not be scheduled for an interview and given final consideration for a nomination.**

SIGNATURE:

DATE:

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I hereby give permission to Congressman John K. Delaney's office to provide my name to any local media who may be interested in contacting me upon the publication of my name in local newspapers if I receive a nomination and/or appointment to a U.S. Service Academy.

PLEASE INDICATE: ☐ YES

☐ NO

Please apply to your U.S. Senators simultaneously when applying with this office:

Honorable Barbara Mikulski  
U.S. Senator  
60 West Street, Suite 202  
Annapolis, MD 21401

Honorable Ben Cardin  
U.S. Senator  
100 South Charles Street  
Tower 1, Suite 1710  
Baltimore, MD 21201